To: DEALERS, MANUFACTURERS,	Permanent Cust. ID#:
TRANSPORTERS AND DISTRIBUTORS.	Current Master Tag#:

**Subject:** APPLICATION FOR 2002-2003 LICENSE PLATES

Beginning November 1, 2001, the Motor Vehicle Services will begin accepting applications for 2002-2003 Dealer, Manufacturer, Distributor and Transporter license plates. <u>Applications will</u> <u>be accepted by mail only, and processed on a "first received, first processed" basis.</u>

You must still obtain a current Master Tag in order to process title applications. Issuance of a Permanent Customer ID Number did not change this requirement. Enclosed is an application for a 2002-2003 Master Tag. All applications must be completed in detail, typed and signed by all authorized representatives or electronically completed and printed.

Used Car Dealers and Parts Dealers are required to register with the Secretary of State Board of Registration of Used Motor Vehicle Dealers and Parts Dealer. Their telephone number is: (478) 207-1460.

Mobile Home Dealers are required to register with the State Fire Marshall's Office. Their telephone number is (404) 656-2064.

For information regarding Georgia's Sales Tax Requirement call telephone number: (404) 417-4490.

The company's legal name must agree on all licenses and applications. Each location must have separate, current Used Car Board Licenses, Fire Marshall's Licenses, Georgia Sales Tax Certificates, Business Licenses and Permanent Customer ID Numbers. If, at any time during the tag cycle, names or addresses change, you must turn in your old tags and apply for new tags. Copies of all current licenses must be resubmitted. If tags are lost or stolen, a police report showing the plate number must be submitted to this office to have the tags taken out of your name. Additional tags can be purchased by submitting Form MV-6, copies of all current licenses, a copy of the current Master Registration Card and fees. If there are changes, you must submit an MV-6A Form reflecting the changes.

Additional applications may be obtained by calling our Form ordering at (404) 362-6500 or they can be downloaded from our Web site <a href="http://www.dmvs.ga.gov/">http://www.dmvs.ga.gov/</a>

Applications, documents, and a check for the fees should be made payable to: MOTOR VEHICLE SERVICES

DO NOT REMIT CASH, MAIL TO: DEPARTMENT OF MOTOR VEHICLE SAFETY ATTN: MOTOR VEHICLE SERVICES SPECIAL TAGS SECTION P.O. BOX 740384

ATLANTA, GA 30374-0384

Drop Point Located at the main entrance: SPECIAL TAGS 1200 TRADEPORT BLVD HAPEVILLE, GA 30354

THE LICENSE PLATE IS LIMITED TO NO LONGER THAN SIX MONTHS USE PER VEHICLE

## **DOCUMENTS REQUIRED**

#### FRANCHISE DEALERS

- a. FORM MV-6
- b. PHOTOCOPY OF GEORGIA SALES TAX CERTIFICATE

**USED CAR DEALERS:** which includes Motor Vehicle Brokers, Independent Motor Vehicle leasing agencies which sell or offer to sell used motor vehicles, Used Motor Vehicle Auction Companies and Pawnbrokers who sell to the public.

- a. FORM MV-6
- b. PHOTOCOPY OF GEORGIA SALES TAX CERTIFICATE
- c. PHOTOCOPY OF CURRENT LICENSE FROM USED CAR BOARD or USED PARTS BOARD. IF YOUR USED CAR AND PARTS LICENSE NAMES DO NOT AGREE, YOU WILL NEED TO APPLY FOR SEPARATE MASTER TAGS.

#### MOBILE HOME DEALERS

- a. FORM MV-6
- b. PHOTOCOPY OF GEORGIA SALES TAX CERTIFICATE
- c. PHOTOCOPY OF CURRENT FIRE MARSHALL'S CERTIFICATE

### MOTORCYCLE DEALERS

- a. FORM MV-6
- b. PHOTOCOPY OF GEORGIA SALES TAX CERTIFICATE

**MANUFACTURER** – Any entity who makes or assembles new motor vehicles.

- a. FORM MV-6
- b. PHOTOCOPY OF GEORGIA SALES TAX CERTIFICATE

**TRANSPORTER** – Any entity engaged in the business of transporting vehicles for others under such vehicles own power or engages in the business of transporting mobile homes and house trailers.

- a. FORM MV-6
- b. PHOTOCOPY OF CURRENT BUSINESS LICENSE.

**DISTRIBUTOR/DISTRIBUTOR MOTORCYCLE** – Any entity that pursuant to a contract with a manufacturer sell or offers to sell new motor vehicles to new motor vehicle dealers.

a. FORM MV-6

The names and addresses on all License/Certificates and MV-6 must totally agree. By submitting your application early, delays in processing your application will be eliminated. We look forward to working with you in the upcoming year.

Form MV-6 Rev. 01/02 MOTOR VEHICLE DEALER, MANUFACTURER, TRANSPORTER, AND DISTRIBUTOR LICENSE PLATE APPLICATION ATTN: SPECIAL TAGS, DEPARTMENT OF MOTOR VEHICLE SAFETY P.O. BOX 740384 ATLANTA, GA 30374-0384 (mail only)

Phone # (404) 675-4947		<u>ht</u>	tp://www.dmv.sta	<u>ite.ga.us/</u>
CHECK PLATE YEARS REQUESTED  [ ] 2002-2003	PERMANENT CUSTOMER ID NUMBER (12 digit)			
	CURR	ENT MASTER	DEALER TAG &	YEAR
IN ACCORDANCE WITH SECTION 40-2-38 OF THE OCGA MANUFACTURED, DISTRIBUTED, SOLD, TRANSPORTED LEGAL NAME OF COMPANY & D.B.A.		ED BY THE APPLI		ID YEARS.
STREET or RFD Address		THE TOBE	& THORE IVOINDE	
CITY, STATE, ZIP-CODE		COUNTY NA	ME	
Mailing Address (If different from above)		*If you are requesting a Transporter tag you must give a description of your operation. Submit a photocopy of current Business License.		
If you are required to be registered with the Secretary of of State Used Motor Vehicle Dealer or Parts Dealer Board. Submit a photocopy of current license.		If you are required to be registered with State Fire Marshall's Office.  Submit a photocopy of current license.		
Georgia Sales Tax Certificate Number Submit a phof current license.	otocopy	Make of unit	sold, manufactured	, leased, distributed:
APPLICANT MUST INDICATE THE TYPE OF TACE  [ ] MOTORCYCLE DEALER	CTURER YCLE DI	<b>REQUESTED:</b> [ ]*TRANSI STRIBUTOR	PORTER [ ] DI	STRIBUTOR
CHECK ONLY ONE BLOCK: MASTER 7  [ ] Are you a Franchised Dealer [ ] Are you an Independent Dealer TOTAL FE	AL TAG:		\$62.00 x \$12.00= \$	NO COUNTER OR OUT-OF-STATE CHECKS
By placement of my signature hereon, I do solemn name or address or making a material false agreer that statements contained on documents submitted company listed above, and that all requirements of Dealer Registration Board have been met.	ment punishad by me are	able by a fine up to Strue and accurate. I	\$5,000 or by imprisonmer also swear that I am an au	nt of up to 5 years, or both, uthorized agent of the
SIGNATURE AND POSITION OF ALL IN APPEAR BELOW (original signatures). If signatures.				
PRINT NAME CLEARLY SIGNATURE		DATE	POSITION	
PRINT NAME CLEARLY SIGNATURE		DATE	POSITION	
PRINT NAME CLEARLY SIGNATURE		DATE	POSITION	
PRINT NAME CLEARLY SIGNATURE		DATE	POSITION	
SUBMIT MV-6 WITH PHOTOCOPIES OF	CURREN	T LICENSES/CE	RTIFICATES: USED	CAR BOARD,

STATE FIRE MARSHALL, GEORGIA SALES TAX AND BUSINESS LICENSE TO EXPEDITE THE PROCESS. ALL NAMES AND ADDRESSES MUST TOTALLY AGREE.

SIGNATURE NAME OF PERSON AUTHORIZED TO COMPLETE THIS FORM DATE

# Form MV-6A Rev. 07/01 MOTOR VEHICLE DEALER, MANUFACTURER, TRANSPORTER, AND DISTRIBUTOR LICENSE PLATE APPLICATION AUTHORIZATION ADDITIONS/DELETIONS

ATTN: SPECIAL TAGS, DEPARTMENT OF MOTOR VEHICLE SAFETY P.O. BOX 740384 ATLANTA, GA 30374-0384 (mail only) Phone # (404) 675-4947 http://www.dmv.state.ga.us/

PERMANEN'	Γ CUSTOMER ID NUM	BER	
CURRENT M	IASTER DEALER TAG	& YEAR	
LEGAL NAM	IE OF COMPANY		
STREET OR	RFD Address		
CITY, STATE, ZIP-CODE		COUNTY NAME	
Mailing addre	ss (if different from abov	re)	
Additions: (Signa	tures and positions of all	individuals authorized to apply, receive and sign)	
Print Name	Signature	Date	
Print Name	Signature	Date	
Print Name	Signature	Date	
Deletions (Please	delete names of individu	als no longer authorized to apply, receive and sign)	
Print Name	Date Deleted	Authorized Representative	
Print Name	Date Deleted	Authorized Representative	
Print Name	Date Deleted	Authorized Representative	
SIGNATURE N	AME OF PERSON AUTHO	RIZED TO COMPLETE THIS FORM DATE	